PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003

Application or Docket Number

10620252

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			34					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBE	R EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			37 minus 20=		*	17		X\$ 9=		OR	X\$18=	306
INDEPENDENT CLAIMS			3 minus 3 =		*	,		X42=		OR	X84=	
MU	LTIPLE DEPENI	DENT CLAIM PR	RESENT			(Z)		+140=		OR	+280=	280
* If	the difference i	less than zer	o, ente	r "0" in co	"0" in column 2		TOTAL		OR	TOTAL	1336	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2)						(Column 3)		SMALL E	NTITY	OR	OTHER SMALL E	
NTA		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT A	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		-		X42=		OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		_		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	HEST MBER MOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		<u> </u>		X42=		OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA						L	+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL	
		(Caluma 4)		(Col	umn 2)	(Column 3)	ADDIT. FEE				
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIC NU PRE	GHEST JMBER VIOUSLY ID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAI FEE
OME	Total	*	Minus	**		=		X\$ 9=		OF	X\$18=	
MEN	Independent	*	Minus	***		=	4	X42=		OF	X84=	
	FIRST PRES	ENTATION OF	MULTIPLE DE	PENDE	NT CLAIN	И		+140=		OF	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE										OF	TOTA	L E
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												